Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Document Page 1 of 59

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1: Identify Yourself	Identify Yourself							
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):						
1.	Your full name								
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture	Robert First name H Middle name	First name Middle name						
	identification to your meeting with the trustee.	Kerzman Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)						
2.	All other names you hav	ve							
	Include your married or maiden names.								
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9158							

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Document Page 2 of 59

Case number (if known)

Debtor 1 Robert H Kerzman

About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
and n ve s I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)		
EINs	EINs		
341 Robin Glen Lane	If Debtor 2 lives at a different address:		
Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
	County		
If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		
	I have not used any business name or EINs. Business name(s) EINs 341 Robin Glen Lane South Elgin, IL 60177 Number, Street, City, State & ZIP Code Kane County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Document Page 3 of 59

Case number (if known) Debtor 1 Robert H Kerzman

Par	Tell the Court About	Your B	ankruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ Chapter 7						
		□с	hapter 11					
			hapter 12					
		□с	hapter 13					
			•					
3.	How you will pay the fee		about how yo	u may pay. Typ attorney is subi	pically, if you are paying the fee yo	k with the clerk's office in your local court for more burself, you may pay with cash, cashier's check, o alf, your attorney may pay with a credit card or ch	or money	
					tallments. If you choose this options (Official Form 103A).	on, sign and attach the Application for Individuals	s to Pay	
			but is not req applies to you	uired to, waive y ur family size ar	your fee, and may do so only if your fee, and may do so only if you you are unable to pay the fee i	n only if you are filing for Chapter 7. By law, a juc our income is less than 150% of the official povert n installments). If you choose this option, you mu cial Form 103B) and file it with your petition.	ty line that	
9.	Have you filed for bankruptcy within the	■ No						
	last 8 years?	☐ Ye			NA (1			
			District		When	Case number		
			District		When When	Case number		
			District		vvnen	Case number		
10.	Are any bankruptcy	■ No)					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	es.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	□ No	Go to l	ine 12.				
	residence?	■ Ye	Haaria	ur landlord obta	ained an eviction judgment agains	st you and do you want to stay in your residence?	•	
		— 16	;s.	No. Go to line	12.			
			_	Yes. Fill out <i>In</i> bankruptcy per		Judgment Against You (Form 101A) and file it wit	th this	

Document Page 4 of 59 Case number (if known) Robert H Kerzman Debtor 1 Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Document Page 5 of 59

Debtor 1 Robert H Kerzman

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 59 Case number (if known) Debtor 1 Robert H Kerzman Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Robert H Kerzman Signature of Debtor 2 Robert H Kerzman Signature of Debtor 1 Executed on August 19, 2016 Executed on MM / DD / YYYY MM / DD / YYYY

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Document Page 7 of 59

Debtor 1 Robert H Kerzman Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Derrick	B. Hager	Date	August 19, 2016	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Derrick B.	Hager			
Derrick b.	Hager, P.C.			
245 W. Roo	osevelt Rd.			
	5, Suite 119			
West Chica	ago, IL 60185			
Number, Street, 0	City, State & ZIP Code			
Contact phone	630-587-7490	Email address	dirkhager@sbcglobal.net	
6286310				
Bar number & St	ate			

De	Case 16		Doc 1	Filed 08/19/16 Document	Entered 08/19/16 12:4 Page 8 of 59 _{Case number}	
Pa	rt 6: Answer These Quest	tions for R	eporting Purp	poses		•
16.	. What kind of debts do you have?	16a.	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred be individual primarily for a personal, family, or household purpose."			
	. •		□ No. Go to	•		
			Yes. Go to	o line 17.		
		16b.			debts? Business debts are debts to through the operation of the busin	
			☐ No. Go to	line 16c.		
			☐ Yes. Go to			
		16c.	State the type	e of debts you owe that	are not consumer debts or business	s debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing	g under Chapter 7. Go to	line 18.	,
	Do you estimate that after any exempt property is excluded and	Yes.			stimate that after any exempt prope o distribute to unsecured creditors?	erty is excluded and administrative expenses
	administrative expenses are paid that funds will		■ No			
	be available for distribution to unsecured creditors?		☐ Yes			
8.	How many Creditors do	1 -49			1,000-5,000	<u> 25,001-50,000</u>
	you estimate that you owe?	□ 50-99] 5001-10,000] 10,001-25,000	☐ 50,001-100,000 ☐ More than100,000
		☐ 100-19 ☐ 200-99		_	10,001-23,000	in wore than 100,000
9.	How much do you	□ \$0 - \$5	50,000] \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?	\$50,001 - \$100,000		_	\$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 millior	· _	1 \$50,000,001 - \$100 million 1 \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
0.	How much do you	□ \$0 - \$5	50,000] \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?	\$50,00	01 - \$100,000		\$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion
		☐ \$100,001 - \$500,000 ☐ \$500,001 - \$1 million		<u> </u>	1 \$50,000,001 - \$100 million 1 \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
art	7: Sign Below					
	you	I have exa	mined this pe	tition, and I declare und	er penalty of perjury that the informa	ation provided is true and correct.
		If I have d	hosen to file u	nder Chapter 7, I am aw	rare that I may proceed, if eligible, u	under Chapter 7, 11,12, or 13 of title 11,
					lable under each chapter, and I cho	
		If no attorn document	ney represents , I have obtain	s me and I did not pay o led and read the notice i	r agree to pay someone who is not required by 11 U.S.C. § 342(b).	an attorney to help me fill out this
		I request r	elief in accord	lance with the chapter o	f title 11, United States Code, speci	ified in this petition.
		I understa bankruptc and 3571	y case can res	alse statement, conceali sult in fines up to \$250,0	ng property, or obtaining money or 00, or imprisonment for up to 20 ye	property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,
			Kerzman of Debtor 1		Signature of Debtor	2
		Executed of		18, 2016	Executed on	
			MM / DD	/YYYY	MM /	DD/YYYY

		1700.11110	<u> </u>	
Fill in this inforr	nation to identify your	case:		
Debtor 1	Robert H Kerzma	n		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	11: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	69,370.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	69,370.00
Par	2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	10,639.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	30,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	59,241.21
	Your total liabilities	\$	99,880.21
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	8,403.04
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	8,309.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a personal,	family, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Case 16-26675 Doc 1 Document

Page 10 of 59 Case number (if known) Debtor 1 Robert H Kerzman

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

10,833.34

\$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	30,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	30,000.00

				Document	Page 11 of 59		
Fill in	n this info	ormation to identify y	our case a	nd this filing:			
Debto	or 1	Robert H Kerz	zman				
		First Name		Middle Name	Last Name		
Debto	or 2 se, if filing)	First Name		Middle Name	Last Name		
(Spous	se, ii iiiirig)	First Name		Middle Name	Last Name		
Unite	d States	Bankruptcy Court for the	he: NORT	HERN DISTRICT OF ILL	INOIS		
Casa	numbor						П о
Case	number				_		Check if this is an amended filing
							amenaea ming
<u>Offi</u>	cial F	orm 106A/B					
Scl	hedi	ıle A/B: Pro	operty	<i>1</i>			12/15
					an asset fits in more than o	one category list the asset	
					le are filing together, both a		
	ation. If mer every qu		tach a separa	ate sheet to this form. On t	he top of any additional pag	jes, write your name and ca	ase number (if known).
Allowe	every qu	uestion.					
Part 1	Descri	be Each Residence, Bui	Iding, Land,	or Other Real Estate You O	wn or Have an Interest In		
1. Do 1	you own o	or have any legal or egu	itable interes	st in any residence, building	, land, or similar property?		
	,	,			, ,		
I	No. Go to I	Part 2.					
	Yes. Whei	re is the property?					
Part 2	Descri	be Your Vehicles					
		trucks, tractors, spo	rt utility vel	hicles, motorcycles			
	. 00						
3.1	Make:	GMC		Who has an interest in t	he nronerty? Chack one		claims or exemptions. Put
0.1	Model:	Acadia		■ Debtor 1 only	The property r check one		ured claims on Schedule D: laims Secured by Property.
	Year:	2011		Debtor 2 only			
		nate mileage:	66,000	Debtor 1 and Debtor 2	only	Current value of the entire property?	Current value of the portion you own?
	Other inf	formation:		☐ At least one of the deb	•		
						* · · · · · · · · · · · · · · · · · · ·	
				☐ Check if this is comm	nunity property	\$13,750.00	\$13,750.00
					icles, other vehicles, and nowmobiles, motorcycle a		
I	No						
	Yes						
_	. 00						
5 A c	dd the do	ollar value of the port	ion vou ow	n for all of vour entries	rom Part 2, including an	v entries for	*
							\$13,750.00
Part 3	Descri	be Your Personal and H	lousehold Ite	ems			
Do yo	ou own d	or have any legal or e	quitable int	erest in any of the follo	wing items?		Current value of the
							portion you own? Do not deduct secured
							claims or exemptions.
6. Ho	usehold	goods and furnishin	qs				

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Dobtor 1	Document Page 12 of 59	
Debtor 1	Robert H Kerzman Case number	(if known)
■ Yes	Describe	
	typical household furniture	\$800.00
□ No	les: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners including cell phones, cameras, media players, games Describe	
	55" flatscreen TV, 32" flat screen TV, smartphone	\$700.00
Examp ■ No	ibles of valueles: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; sta other collections, memorabilia, collectiblesDescribe	mp, coin, or baseball card collections;
Examp	nent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; musical instruments Describe	canoes and kayaks; carpentry tools;
	body boxing bag	\$50.00
■ No □ Yes 11. Clother Exam □ No	ples: Pistols, rifles, shotguns, ammunition, and related equipment Describe	
	necessary wearing apparel	\$1,000.00
☐ No	ry ples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches Describe	s, gems, gold, silver
	i-watch	\$200.00
Exam No □ Yes 14. Any o □ No	arm animals ples: Dogs, cats, birds, horses Describe ther personal and household items you did not already list, including any health aids you did n Give specific information	ot list
	100 year old baby grand piano	\$750.00

Official Form 106A/B Schedule A/B: Property page 2

Page 13 of 59
Case number (if known) Debtor 1 Robert H Kerzman 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3.500.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Cash \$10.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... **Charles Schwab Bank** \$0.00 17.1. Checking SEE schedule F - overdrawn account **TCF Bank** \$110.00 Checking 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture □ No Yes. Give specific information about them..... Name of entity: % of ownership: Grace Aiadan, LLC 100% % \$0.00 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes.

Schedule A/B: Property

Official Form 106A/B

		Case 16	-26675	Doc 1	Filed 08/19/16 Document	Entered 08/19/16 12:44:10 Page 14 of 59	Desc Main
D	ebtor 1	Robert H K	Cerzman		Document	Case number (if known)	
23	Annuiti	es (A contract	for a periodic	c payment of	money to you, either for	life or for a number of years)	
	☐ Yes		Issuer name	and descripti	on.		
24		s in an educa C. §§ 530(b)(1)			n a qualified ABLE pro	gram, or under a qualified state tuition pro	gram.
	Yes		Institution na	me and desc	ription. Separately file th	ne records of any interests.11 U.S.C. § 521(c):	
		=	2 Section 5	529 college	saving funds		\$37,000.00
25	. Trusts,	equitable or t	uture intere	sts in prope	rty (other than anythin	g listed in line 1), and rights or powers exe	rcisable for your benefit
	■ No	Give specific i	nformation al	oout them			
26					ts, and other intellectu	al property	
						nd licensing agreements	
	_	Give specific i	nformation al	oout them			
27	Exampa ■ No	31	ermits, exclus	sive licenses,		n holdings, liquor licenses, professional license	es
		Give specific i		oout them			
M	oney or p	oroperty owed	I to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28	_	unds owed to	you				
	■ No □ Yes. 0	Give specific ir	nformation ab	out them, inc	cluding whether you alrea	ady filed the returns and the tax years	
29	Example No		or lump sum a	alimony, spou	usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
	☐ Yes. (Give specific in	formation				
30			iges, disabilit	y insurance p	payments, disability bend someone else	efits, sick pay, vacation pay, workers' comper	nsation, Social Security
	☐ Yes.	Give specific i	nformation				
31		s in insurance les: Health, dis		insurance; h	ealth savings account (l	HSA); credit, homeowner's, or renter's insurar	nce
		Name the insu		ny of each po pany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
32	If you a				someone who has die t proceeds from a life in:	ed surance policy, or are currently entitled to rece	sive property because
		Give specific i	nformation				
33					you have filed a lawsui surance claims, or rights	it or made a demand for payment to sue	

Debtor 1	Robert H Kerzman	Document	Page 15 of	Case number (if known)	
■ Ye	s. Describe each claim				
		wrongful termination of	laim against Elsev	ier, corportation	
		Stephen Padilla, Esq. Los Angels, CA	562-682-5597		\$15,000.00
34. Othe	er contingent and unliquidated	I claims of every nature, incl	uding counterclaims o	of the debtor and rights to	set off claims
■ No					
☐ Ye	s. Describe each claim				
35. Any	financial assets you did not a	Iready list			
■ No					
☐ Ye	s. Give specific information				
	d the dollar value of all of you Part 4. Write that number her			, ,	\$52,120.00
Part 5:	Describe Any Business-Related P	roperty You Own or Have an Inte	rest In. List any real esta	ate in Part 1.	
37. Do yo	u own or have any legal or equita	ble interest in any business-rela	ted property?		
■ No.	Go to Part 6.				
☐ Yes	. Go to line 38.				
46. Do y	ou own or have an interest in farrou own or have any legal or ele. Go to Part 7. Ges. Go to line 47.		- or commercial fishin	ng-related property?	
Part 7:	Describe All Property You Ov	vn or Have an Interest in That Yo	u Did Not List Above		
<i>Exa</i> ■ No	ou have other property of any mples: Season tickets, country of a s. Give specific information	club membership	?		
	d the dollar value of all of you		nat number here		\$0.00
Part 8:	List the Totals of Each Part of	this Form			
55. Pa ı	rt 1: Total real estate, line 2				\$0.00
	rt 2: Total vehicles, line 5		\$13,750.00		
57. Pa i	rt 3: Total personal and house	hold items, line 15	\$3,500.00		
58. Pa i	rt 4: Total financial assets, line	∍ 36	\$52,120.00		
59. Pa i	rt 5: Total business-related pr	operty, line 45	\$0.00		
60. Pa i	rt 6: Total farm- and fishing-re	lated property, line 52	\$0.00		
61. Pa ı	rt 7: Total other property not I	sted, line 54	\$0.00		
62. To t	al personal property. Add line	s 56 through 61	\$69,370.00	Copy personal property to	otal \$69,370.00
63. To t	al of all property on Schedule	A/B . Add line 55 + line 62			\$69,370.00

Official Form 106A/B Schedule A/B: Property page 5

Fill in this infor	mation to identify your	case:		
Debtor 1	Robert H Kerzma	n		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemp	ptions are	you claiming?	Check one only	, even if	your spouse is	s filing with	vou.
----	--------------------	------------	---------------	----------------	-----------	----------------	---------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2011 GMC Acadia 66,000 miles	\$13,750.00		\$2,400.00	735 ILCS 5/12-1001(c)
Line from Schedule A.D. S.			100% of fair market value, up to any applicable statutory limit	
typical household furniture Line from Schedule A/B: 6.1	\$800.00		\$800.00	735 ILCS 5/12-1001(b)
Line IIom Schedule A.D. G. I			100% of fair market value, up to any applicable statutory limit	
55" flatscreen TV, 32" flat screen TV, smartphone	\$700.00		\$700.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
body boxing bag Line from Schedule A/B: 9.1	\$50.00		\$50.00	735 ILCS 5/12-1001(b)
Line IIom Schedule A.B. 3.1			100% of fair market value, up to any applicable statutory limit	
necessary wearing apparel Line from Schedule A/B: 11.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(a)
Line nom Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Document Page 17 of 59

Case number (if known)

	11000111111012IIIIIII				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	i-watch Line from Schedule A/B: 12.1	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
				100% of fair market value, up to any applicable statutory limit	
	100 year old baby grand piano Line from Schedule A/B: 14.1	\$750.00		\$750.00	735 ILCS 5/12-1001(b)
	Elle Holli Goricada 772. Titi			100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$10.00		\$10.00	735 ILCS 5/12-1001(b)
	Line Holl Golleddie PAB. 10.1			100% of fair market value, up to any applicable statutory limit	
	Checking: TCF Bank Line from Schedule A/B: 17.2	\$110.00		\$110.00	735 ILCS 5/12-1001(b)
	Line Horr Scredule A/D. 11.2			100% of fair market value, up to any applicable statutory limit	
	2 Section 529 college saving funds Line from Schedule A/B: 24.1	\$37,000.00		\$37,000.00	735 ILCS 5/12-1001(j)
	Elife Hoff Genedale 742. 24.1			100% of fair market value, up to any applicable statutory limit	
	wrongful termination claim against Elsevier, corportation	\$15,000.00		\$15,000.00	735 ILCS 5/12-1001(h)(4)
	Stephen Padilla, Esq. 562-682-5597 Los Angels, CA Line from <i>Schedule A/B</i> : 33.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every ■ No			led on or after the date of adjustmer	nt.)
	☐ Yes. Did you acquire the property cover	ed by the exemption wi	thin 1	,215 days before you filed this case	?
	□ No				
	□ Yes				

		Document Page	18 of 59		
Fill in this informatio	n to identify you				
Debtor 1 R	obert H Kerzm	nan			
	rst Name	Middle Name Last Name	9	-	
Debtor 2 (Spouse if, filing) Fir	rst Name	Middle Name Last Nam		-	
			-		
United States Bankrup	otcy Court for the	: NORTHERN DISTRICT OF ILLINOIS		-	
Case number					
(if known)					if this is an
				ameno	ded filing
Official Form 10	06D				
		Who Have Claims Secu	red by Propert	V	12/15
ochedale D.	Creditors	Wild have claims secui	ed by Fropert	<u>y </u>	12/13
		If two married people are filing together, both are out, number the entries, and attach it to this for			
number (if known).	3.,	,	, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,	
I. Do any creditors have	claims secured by	y your property?			
□ No. Check this	box and submit t	his form to the court with your other schedule	s. You have nothing else t	to report on this form.	
Yes. Fill in all o	f the information	below.			
Part 1: List All Sec	cured Claims				
2. List all secured claim	s If a creditor has		. Column A	Column B	Column C
		more than one secured claim, list the creditor separ	ately		
for each claim. If more th	nan one creditor has	more than one secured claim, list the creditor separ s a particular claim, list the other creditors in Part 2. cal order according to the creditor's name.	ately	Value of collateral that supports this claim	Unsecured portion If any
for each claim. If more the much as possible, list the Wells Fargo D	nan one creditor has claims in alphabeti	s a particular claim, list the other creditors in Part 2. ical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
for each claim. If more the much as possible, list the	nan one creditor has claims in alphabeti	s a particular claim, list the other creditors in Part 2. cal order according to the creditor's name. Describe the property that secures the claim:	As Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion If any
for each claim. If more th much as possible, list the Wells Fargo D Services	nan one creditor has claims in alphabeti	s a particular claim, list the other creditors in Part 2. ical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
for each claim. If more the much as possible, list the 2.1 Wells Fargo D Services Creditor's Name Po Box 3569	nan one creditor has claims in alphabeti Dealer	s a particular claim, list the other creditors in Part 2. cal order according to the creditor's name. Describe the property that secures the claim: 2011 GMC Acadia 66,000 miles	Amount of claim Do not deduct the value of collateral. \$10,639.00	Value of collateral that supports this claim	Unsecured portion If any
for each claim. If more the much as possible, list the 2.1 Wells Fargo D Services Creditor's Name Po Box 3569 Rancho Cucal	nan one creditor has claims in alphabeti Dealer	s a particular claim, list the other creditors in Part 2. cal order according to the creditor's name. Describe the property that secures the claim: 2011 GMC Acadia 66,000 miles As of the date you file, the claim is: Check all the apply.	Amount of claim Do not deduct the value of collateral. \$10,639.00	Value of collateral that supports this claim	Unsecured portion If any
for each claim. If more the much as possible, list the 2.1 Wells Fargo D Services Creditor's Name Po Box 3569 Rancho Cucal 91729	nan one creditor has claims in alphabeti Dealer monga, CA	s a particular claim, list the other creditors in Part 2. cal order according to the creditor's name. Describe the property that secures the claim: 2011 GMC Acadia 66,000 miles As of the date you file, the claim is: Check all the apply. Contingent	Amount of claim Do not deduct the value of collateral. \$10,639.00	Value of collateral that supports this claim	Unsecured portion If any
for each claim. If more the much as possible, list the 2.1 Wells Fargo D Services Creditor's Name Po Box 3569 Rancho Cucal	nan one creditor has claims in alphabeti Dealer monga, CA	s a particular claim, list the other creditors in Part 2. cal order according to the creditor's name. Describe the property that secures the claim: 2011 GMC Acadia 66,000 miles As of the date you file, the claim is: Check all the apply. Contingent Unliquidated	Amount of claim Do not deduct the value of collateral. \$10,639.00	Value of collateral that supports this claim	Unsecured portion If any
for each claim. If more the much as possible, list the 2.1 Wells Fargo D Services Creditor's Name Po Box 3569 Rancho Cucal 91729 Number, Street, City, S	nan one creditor has claims in alphabeti Dealer monga, CA State & Zip Code	s a particular claim, list the other creditors in Part 2. cal order according to the creditor's name. Describe the property that secures the claim: 2011 GMC Acadia 66,000 miles As of the date you file, the claim is: Check all the apply. Contingent	Amount of claim Do not deduct the value of collateral. \$10,639.00	Value of collateral that supports this claim	Unsecured portion
for each claim. If more the much as possible, list the 2.1 Wells Fargo D Services Creditor's Name Po Box 3569 Rancho Cucal 91729 Number, Street, City, \$	nan one creditor has claims in alphabeti Dealer monga, CA State & Zip Code	s a particular claim, list the other creditors in Part 2. cal order according to the creditor's name. Describe the property that secures the claim: 2011 GMC Acadia 66,000 miles As of the date you file, the claim is: Check all the apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.	Amount of claim Do not deduct the value of collateral. \$10,639.00	Value of collateral that supports this claim	Unsecured portion If any
for each claim. If more the much as possible, list the 2.1 Wells Fargo D Services Creditor's Name Po Box 3569 Rancho Cucal 91729 Number, Street, City, 3 Who owes the debt? Company of the property of the property of the much as possible.	nan one creditor has claims in alphabeti Dealer monga, CA State & Zip Code	s a particular claim, list the other creditors in Part 2. cal order according to the creditor's name. Describe the property that secures the claim: 2011 GMC Acadia 66,000 miles As of the date you file, the claim is: Check all the apply. Contingent Unliquidated Disputed	Amount of claim Do not deduct the value of collateral. \$10,639.00	Value of collateral that supports this claim	Unsecured portion If any
for each claim. If more the much as possible, list the 2.1 Wells Fargo D Services Creditor's Name Po Box 3569 Rancho Cucal 91729 Number, Street, City, S Who owes the debt? Company Debtor 1 only Debtor 2 only	man one creditor has claims in alphabeti Dealer monga, CA State & Zip Code Check one.	as a particular claim, list the other creditors in Part 2. cal order according to the creditor's name. Describe the property that secures the claim: 2011 GMC Acadia 66,000 miles As of the date you file, the claim is: Check all the apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage of car loan)	Amount of claim Do not deduct the value of collateral. \$10,639.00	Value of collateral that supports this claim	Unsecured portion If any
for each claim. If more the much as possible, list the 2.1 Wells Fargo D Services Creditor's Name Po Box 3569 Rancho Cucar 91729 Number, Street, City, 3 Who owes the debt? Company Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2	man one creditor has claims in alphabeti Dealer monga, CA State & Zip Code Check one.	s a particular claim, list the other creditors in Part 2. cal order according to the creditor's name. Describe the property that secures the claim: 2011 GMC Acadia 66,000 miles As of the date you file, the claim is: Check all the apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage of car loan) Statutory lien (such as tax lien, mechanic's lie	Amount of claim Do not deduct the value of collateral. \$10,639.00	Value of collateral that supports this claim	Unsecured portion If any
for each claim. If more the much as possible, list the 2.1 Wells Fargo D Services Creditor's Name Po Box 3569 Rancho Cucal 91729 Number, Street, City, S Who owes the debt? Company Debtor 1 only Debtor 2 only	man one creditor has claims in alphabeti Dealer monga, CA State & Zip Code Check one.	as a particular claim, list the other creditors in Part 2. cal order according to the creditor's name. Describe the property that secures the claim: 2011 GMC Acadia 66,000 miles As of the date you file, the claim is: Check all the apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage of car loan) Statutory lien (such as tax lien, mechanic's lie) Judgment lien from a lawsuit	Amount of claim Do not deduct the value of collateral. \$10,639.00	Value of collateral that supports this claim	Unsecured portion If any
for each claim. If more the much as possible, list the 2.1 Wells Fargo D Services Creditor's Name Po Box 3569 Rancho Cucal 91729 Number, Street, City, S Who owes the debt? C Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the del Check if this claim re	man one creditor has claims in alphabeti Dealer monga, CA State & Zip Code Check one. 2 only btors and another elates to a Opened	Describe the property that secures the claim: 2011 GMC Acadia 66,000 miles As of the date you file, the claim is: Check all the apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage of car loan) Statutory lien (such as tax lien, mechanic's lie) Judgment lien from a lawsuit	Amount of claim Do not deduct the value of collateral. \$10,639.00	Value of collateral that supports this claim	Unsecured portion If any
for each claim. If more the much as possible, list the 2.1 Wells Fargo D Services Creditor's Name Po Box 3569 Rancho Cucal 91729 Number, Street, City, S Who owes the debt? C Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the del Check if this claim re	man one creditor has claims in alphabetic pealer monga, CA State & Zip Code Check one. 2 only btors and another elates to a Opened 03/13 Last	Describe the property that secures the claim: 2011 GMC Acadia 66,000 miles As of the date you file, the claim is: Check all the apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage of car loan) Statutory lien (such as tax lien, mechanic's lie) Judgment lien from a lawsuit	Amount of claim Do not deduct the value of collateral. \$10,639.00	Value of collateral that supports this claim	Unsecured portion If any
for each claim. If more the much as possible, list the 2.1 Wells Fargo D Services Creditor's Name Po Box 3569 Rancho Cucal 91729 Number, Street, City, S Who owes the debt? C Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the del Check if this claim re	man one creditor has claims in alphabeti Dealer monga, CA State & Zip Code Check one. 2 only btors and another elates to a Opened	Describe the property that secures the claim: 2011 GMC Acadia 66,000 miles As of the date you file, the claim is: Check all the apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage of car loan) Statutory lien (such as tax lien, mechanic's lie) Judgment lien from a lawsuit	Amount of claim Do not deduct the value of collateral. \$10,639.00 ar secured h) se Money Security	Value of collateral that supports this claim	Unsecured portion If any

If this is the last page of your form, add the dollar value totals from all pages. \$10,639.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

			D	ocument	Page 19 of	<u> </u>	_	
Fill	in this inform	ation to identify your c	ase:					
Del	otor 1	Robert H Kerzman						
		First Name	Middle Nam	ie	Last Name			
	otor 2							
(Spc	ouse if, filing)	First Name	Middle Nam	ie	Last Name			
Uni	ted States Ban	kruptcy Court for the:	NORTHERN	DISTRICT OF ILI	LINOIS			
Car	se number							
	nown)						☐ Check	if this is an
							amend	led filing
~ ·		4005/5						
	ficial Form				0 1 :			40/45
		F: Creditors WI						12/15
Sche Sche left. nam	edule G: Executoredule D: Credito Attach the Contine e and case num	acts or unexpired leases tory Contracts and Unexpirs Who Have Claims Secuinuation Page to this page ber (if known). of Your PRIORITY Uns	ed Leases (Offi red by Property . If you have no	cial Form 106G). D . If more space is information to rep	Do not include any oneeded, copy the Pa	reditors with partially s art you need, fill it out,	secured claims that a number the entries i	are listed in n the boxes on the
1.	Do any creditor	rs have priority unsecured	claims against	you?				
	☐ No. Go to Pa	art 2.						
	Yes.							
2.	identify what type possible, list the Part 1. If more th	priority unsecured claims. e of claim it is. If a claim has claims in alphabetical order nan one creditor holds a par	both priority and according to the icular claim, list	I nonpriority amount creditor's name. If the other creditors in	ts, list that claim here you have more than n Part 3.	e and show both priority a two priority unsecured cl	and nonpriority amoun	ts. As much as
	(For an explanat	tion of each type of claim, se	e the instruction	ঃ for this form in the	e instruction booklet.)	Total claim	Priority amount	Nonpriority amount
2.1		Revenue Service (1/	I/11) Las	t 4 digits of accou	nt number	\$30,000.00	\$30,000.00	\$0.00
	Priority Cree PO Box	ditor's Name	Wha	en was the debt in	curred?			
		7340 phia, PA 19101-7346	*****	ii was the aest iii			-	
		eet City State Zlp Code	As	of the date you file	e, the claim is: Chec	k all that apply		
	Who incurred	the debt? Check one.		Contingent				
	Debtor 1 or	nly		Jnliquidated				
	Debtor 2 or	nly		Disputed				
	Debtor 1 ar	nd Debtor 2 only	Тур	e of PRIORITY uns	secured claim:			
	☐ At least one	e of the debtors and another		Domestic support of	bligations			
	_	is claim is for a communi	ty debt	Γaxes and certain ο	other debts you owe the	he government		
	Is the claim su	ubject to offset?		Claims for death or	personal injury while	you were intoxicated		
	■ No			Other. Specify				
	☐ Yes				14-2015			
Pai	rt 2: List All	of Your NONPRIORITY	Unsecured (laime				
		rs have nonpriority unsecu						
٥.	-	e nothing to report in this pa	_	-	varir athar ashadular			
	Yes.	e nothing to report in this pa	t. Submit this for	III to the court with	your other scriedules	.		
4.	unsecured claim	nonpriority unsecured cla	for each claim. F	or each claim listed	d, identify what type o	f claim it is. Do not list cl	aims already included	in Part 1. If more

Official Form 106 E/F

Total claim

Page 20 of 59 Document Debtor 1 Robert H Kerzman Case number (if know) 4.1 \$1,254.00 **Best Buy Credit Card Services** Last 4 digits of account number 4945 Nonpriority Creditor's Name Opened 01/05 Last Active PO Box 790441 When was the debt incurred? 7/09/16 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account 4.2 Brksb/cbna Last 4 digits of account number 6650 \$1,166.00 Nonpriority Creditor's Name Opened 09/12 Last Active Po Box 6497 When was the debt incurred? 11/27/15 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.3 **Cadence Health** Last 4 digits of account number \$189.00 2767 Nonpriority Creditor's Name 25 North Winfield Rd. 9/25/15 When was the debt incurred? Winfield, IL 60190 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed

Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Treatment ☐ Yes

Document Page 21 of 59 Debtor 1 Robert H Kerzman Case number (if know) 4.4 \$2,785.00 **Capital One** Last 4 digits of account number 8469 Nonpriority Creditor's Name Po Box 30285 Opened 03/11 Last Active Po Box 62180 When was the debt incurred? 7/08/16 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.5 **CEP-AMERICA-ILLINOIS PC** Last 4 digits of account number 0799 \$40.00 Nonpriority Creditor's Name PO Box 582663 When was the debt incurred? 10/8/14 Modesto, CA 95358-0046 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Treatment** Other. Specify 4.6 **Charles Schwabb Bank** \$5,980.56 0012 Last 4 digits of account number Nonpriority Creditor's Name PO Box 982605 When was the debt incurred? El Paso, TX 79998-2605 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed

Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Overdraft protection account ☐ Yes

Document Page 22 of 59 Debtor 1 Robert H Kerzman Case number (if know) 4.7 \$0.00 Chase Last 4 digits of account number 3682 Nonpriority Creditor's Name Attn: Correspondence Dept Opened 03/07 Last Active Po Box 15298 When was the debt incurred? 6/02/16 Wilmingotn, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify open line of credit with zero balance ☐ Yes 4.8 **Chase Card Services** Last 4 digits of account number 9921 \$17,861.00 Nonpriority Creditor's Name Attn: Correspondence Dept Opened 10/01/12 Last Active Po Box 15298 When was the debt incurred? 7/08/16 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.9 **Chase Card Services** Last 4 digits of account number \$12,905.00 7486 Nonpriority Creditor's Name Attn: Correspondence Dept Opened 05/10 Last Active Po Box 15298 When was the debt incurred? 8/07/16 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

Official Form 106 E/F

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

■ Other. Specify Credit Card

 \square Obligations arising out of a separation agreement or divorce that you did not

 \square Debts to pension or profit-sharing plans, and other similar debts

Document Page 23 of 59 Case number (if know) Debtor 1 Robert H Kerzman 4.1 Citibank / Sears 4982 \$3,636.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Citicorp Credit Services/Attn: Opened 02/06 Last Active Centraliz When was the debt incurred? 7/12/16 Po Box 790040 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.1 0678 Citibank/The Home Depot \$312.00 Last 4 digits of account number Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Opened 09/09 Last Active **Bankruptcy** When was the debt incurred? 7/21/16 Po Box 790040 S Louis, MO 63129 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.1 **Collection Professionals Inc** 6529 \$24.00 Last 4 digits of account number Nonpriority Creditor's Name 400 North Dudley St., PO Box 401 When was the debt incurred? Macomb, IL 61455-1546 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

Official Form 106 E/F

■ No

☐ Yes

Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify collection for SBLHS

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Document Page 24 of 59

Debtor 1 Robert H Kerzman Case number (if know) 4.1 \$428.46 Comcast 0933 Last 4 digits of account number 3 Nonpriority Creditor's Name PO Box 3002 When was the debt incurred? Southeastern, PA 19398-3002 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Unpaid cable TV ☐ Yes 4.1 **Discover Financial** 1974 \$10,885.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 08/05 Last Active Po Box 3025 When was the debt incurred? 7/07/16 New Albany, OH 43054 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.1 7635 \$839.40 **Illinois Tollway Authority** Last 4 digits of account number 5 Nonpriority Creditor's Name 2700 Ogden Ave. When was the debt incurred? **Downers Grove, IL 60515** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify UNPIAD TOLLS ☐ Yes

Entered 08/19/16 12:44:10 Case 16-26675 Doc 1 Filed 08/19/16 Desc Main

Document Page 25 of 59 Debtor 1 Robert H Kerzman Case number (if know) 4.1 Illinos Gastroenterology Group LLC 5963 \$123.85 Last 4 digits of account number 6 Nonpriority Creditor's Name PO Box 7630 When was the debt incurred? Gurnee, IL 60031-7002 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Treatment ☐ Yes 4.1 **Keynote Consulting** 2492 \$124.00 Last 4 digits of account number Nonpriority Creditor's Name 220 West Campus Drive When was the debt incurred? **Opened 04/16** Suite 102 Arlington Heights, IL 60004 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney Illinois** ☐ Yes ■ Other Specify Gastroenterology Grou 4.1 Kohls/Capital One 2934 \$532.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 02/04 Last Active Po Box 3120 When was the debt incurred? 11/29/15 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim:

☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Document Page 26 of 59

Debtor 1 Robert H Kerzman Case number (if know) 4.1 **Quest Diagnostics** 9243 \$118.22 Last 4 digits of account number 9 Nonpriority Creditor's Name 1355 Mittel Boulevard When was the debt incurred? Attn: Patient Billing Wood Dale, IL 60191-1024 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical Treatment 4.2 Randallwood Radiology SC 5312 \$15.13 Last 4 digits of account number 0 Nonpriority Creditor's Name 1121 Lake Cook Rd., Ste M 6/6/16 When was the debt incurred? Deerfield, IL 60015-5234 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Treatment ☐ Yes 4.2 Tri-Cities Surgery Center LLC 7340 \$22.59 Last 4 digits of account number Nonpriority Creditor's Name 345 Delnor Dr. When was the debt incurred? 11/10/15 Geneva, IL 60134 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Treatment ☐ Yes

Entered 08/19/16 12:44:10 Case 16-26675 Doc 1 Filed 08/19/16 Desc Main

Page 27 of 59 Case number (if know) Document Debtor 1 Robert H Kerzman

Visa Dept Store National Bank	Last 4 digits of account number	5141	\$0
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 8053	When was the debt incurred?	Opened 04/06 Last Active 5/03/16	
Mason, OH 45040			
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify open line o	f credit with zero balance	

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

State Collection Services Inc 2509 S. Stoughton Rd. Madison, WI 53716

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 30,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 30,000.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 59,241.21
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 59,241.21

		1200000	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Fill in this infor	mation to identify your	case:		
Debtor 1	Robert H Kerzma	n		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
0	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	J.,,		State		

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Document Page 29 of 59

		DUGUILE	<u> </u>	11 39	
Fill in this	information to identify your	case:			
Debtor 1	Robert H Kerzma	n			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Office Clar	oo Bariii aptoy Court for the.		0		
Case numb (if known)					☐ Check if this is an
					amended filing
Official	Form 106U				
	Form 106H	abtera			
scnea	ule H: Your Cod	eptors			12/15
ill it out, an our name	nd number the entries in the and case number (if known)	boxes on the left. Attach . Answer every question	n the Additional Page t	to this page. On the top of	ded, copy the Additional Page, f any Additional Pages, write
1. Do y	ou have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No					
☐ Yes					
	nin the last 8 years, have you a, California, Idaho, Louisiana,				ates and territories include
■ No.	Go to line 3.				
	Did your spouse, former spou	use, or legal equivalent live	e with you at the time?		
in line Form 1	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed the	rith you. List the person shown creditor on Schedule D (Official hedule E/F, or Schedule G to fill
_	Column 1: Your codebtor lame, Number, Street, City, State and Zl	P Code		Column 2: The credit Check all schedules the	or to whom you owe the debt hat apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street	Chata	ZIP Code	_	
C	City	State	ZIP Code		
22				□ Cabadula D. lina	
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
C	City	State	ZIP Code		

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Document Page 30 of 59

						-					
Fill	in this information to identify your	case:									
Del	btor 1 Robert H k	Kerzman			_						
	btor 2 puse, if filing)				_						
Uni	ited States Bankruptcy Court for t	ne: NORTHERN DISTRIC	CT OF ILLINOIS								
	se number nown)	-			□ A		ed filing ent shov	ving postpetitior e following date			
0	fficial Form 106I						/M / DD/ Y		- · · · · · · · · · · · · · · · · · · ·		
	chedule I: Your Inc	come				IV	ו וטט ויוויי	111		12/15	
sup spo atta	as complete and accurate as population of the po	ou are married and not fili our spouse is not filing w n. On the top of any additi	ng jointly, and your ith you, do not inclu	spouse i de inforn	s liv natio	ing with on abou	you, inclu t your spo	ude info ouse. If	ormation about more space is	t your needed,	
1.	Fill in your employment information.		Debtor 1				Debtor 2 or non-filing spouse				
	If you have more than one job,	Fundament status	■ Employed				☐ Employed				
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not employed				
	employers.	Occupation	Director of Sales								
	Include part-time, seasonal, or self-employed work.	Employer's name	Pipeline Health Holdings LLC								
	Occupation may include studen or homemaker, if it applies.	t Employer's address	600 California S Suite 520 San Francisco,		08						
		How long employed t	here? 5 mont	hs							
Pai	rt 2: Give Details About M	•					_				
Esti	imate monthly income as of the use unless you are separated.		you have nothing to r	eport for a	any	line, write	e \$0 in the	space.	Include your no	n-filing	
	ou or your non-filing spouse have e space, attach a separate sheet		ombine the informatio	n for all e	mplo	oyers for	that perso	on on the	e lines below. If	you need	
						For De	btor 1		Debtor 2 or filing spouse		
2.	List monthly gross wages, sa deductions). If not paid monthly			2.	\$	10	,833.34	\$	N/A	-	
3.	Estimate and list monthly over	ertime pay.		3.	+\$		0.00	+\$	N/A	-	
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$	10,8	33.34	\$_	N/A		

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Document Page 31 of 59

Deb	tor 1	Robert H Kerzman	-	(Case	number (<i>if kn</i>	own)				
					For	Debtor 1			Debtor filing s	2 or	
	Сор	y line 4 here	4.		\$	10,833	.34	\$	9	N/A	<u> </u>
5.	List	all payroll deductions:									
	5a. 5b. 5c.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5a 5b 5c	٠.	\$_ \$_ \$.00	\$ \$		N/A N/A	<u>\</u>
	5d. 5e. 5f.	Required repayments of retirement fund loans Insurance Domestic support obligations	5d 5e 5f.	l.	\$_ \$_ \$_	0 321	.00	\$ \$		N/A N/A	<u>\</u>
	5g. 5h.	Union dues Other deductions. Specify:	5g 5h). i.+	\$ \$	0	.00	+ \$		N/A	<u>\</u>
6. 7		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. 7.		\$_ •	2,430		\$		N/A	_
7. 8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	8a 8b 8c 8d 8e	i.	\$	0 0 0	1.00 1.00 1.00 1.00 1.00 1.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ +		N/A N/A N/A N/A N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	9	<u> </u>	0	.00	\$		N/	Ά.
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		8,403.04	+ \$_		N/A	= \$ _	8,403.04
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not actify:	depe			•			chedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							12.	\$	8,403.04
13.	Do y	vou expect an increase or decrease within the year after you file this form. No. Yes Explain:	?							Comb month	ined Ily income

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Document Page 32 of 59

	in this information to identify your case:				
	•				
Debt	Robert H Kerzman		-	eck if this is:	
Debt	otor 2			An amended filing A supplement show	wing postpetition chapter
(Spc	ouse, if filing)		_ _		the following date:
Unite	ted States Bankruptcy Court for the: NORTHERN DISTRICT C	OF ILLINOIS	_	MM / DD / YYYY	
Case	se number				
(If kr	nown)				
Of	fficial Form 106J				
	chedule J: Your Expenses				12/1
Be a info	as complete and accurate as possible. If two married promation. If more space is needed, attach another sheet mber (if known). Answer every question.				
Part 1.	t 1: Describe Your Household Is this a joint case?				
	No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, E.	xpenses for Separate H	lousehold of De	ebtor 2.	
2					
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2.	•	relationship to ebtor 2	Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Daughter		10	■ Yes
					□ No
		Son		12	■ Yes
					□ No
					☐ Yes
					□ No
3.	Do your expenses include ■ No				☐ Yes
0.	expenses of people other than yourself and your dependents?				
exp	Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date upenses as of a date after the bankruptcy is filed. If this is plicable date.				
the	lude expenses paid for with non-cash government assist value of such assistance and have included it on <i>Sche</i> fficial Form 106I.)			Your exp	enses
4.	The rental or home ownership expenses for your residual payments and any rent for the ground or lot.	dence. Include first mor	tgage 4.	\$	1,140.00
	If not included in line 4:				
	4a. Real estate taxes		4a.	\$	0.00
	4b. Property, homeowner's, or renter's insurance		4b.	\$	0.00
	4c. Home maintenance, repair, and upkeep expenses		4c.	· -	0.00
F	4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, sur	ah aa hawaa aw 9 1	4d.	·	0.00
כ	ADDITIONAL MORTOSOP DAVIDENTS FOR VOLIT RESIDENCE CITY	THE DOME ACHIEV IOSES		70	

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Document Page 33 of 59

	Robert H Kerzman Ca	ase numl	ber (if known)	
. Utili	ies:			
6a.	Electricity, heat, natural gas	6a.	\$	285.00
6b.	Water, sewer, garbage collection	6b.	\$	100.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	330.00
6d.	Other. Specify:	6d.	\$	0.00
Foo	l and housekeeping supplies	7.	\$	750.00
Chil	dcare and children's education costs	8.	\$	175.00
Clot	ning, laundry, and dry cleaning	9.	\$	200.00
	onal care products and services	10.	\$	100.00
1. Med	cal and dental expenses	11.	\$	200.00
2. Trar	sportation. Include gas, maintenance, bus or train fare.			
	ot include car payments.	12.	\$	300.00
3. Ente	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
↓. Cha	itable contributions and religious donations	14.	\$	25.00
5. Insu				
	ot include insurance deducted from your pay or included in lines 4 or 20.	4-	•	_
	Life insurance	15a.	·	0.00
15b.	Health insurance	15b.	·	0.00
15c.	Vehicle insurance	15c.	\$	65.00
	Other insurance. Specify:	_ 15d.	\$	0.00
	s. Do not include taxes deducted from your pay or included in lines 4 or 20.	_		
	ify: See Schedule E past due taxes	16.	\$	500.00
	Ilment or lease payments:	•		
	Car payments for Vehicle 1	17a.	·	339.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
17d.	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as	_		
ded	icted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	·	3,450.00
. Othe	r payments you make to support others who do not live with you.		\$	250.00
	ify: Court-ordered contribution to school & clothing	19.		
	r real property expenses not included in lines 4 or 5 of this form or on Schedu			
20a.	Mortgages on other property	20a.	\$	0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	Homeowner's association or condominium dues	20e.	\$	0.00
. Othe	r: Specify:	21.	+\$	0.00
	· · · -	_	•	3.00
	ulate your monthly expenses		•	
	Add lines 4 through 21.		\$	8,309.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	8,309.00
Cala	ulate your menthly not income			
	ulate your monthly net income.	220	c	0.400.04
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	8,403.04
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	8,309.00
00.5	Cubtract your monthly overseas from your monthly in acres			
23C.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	94.04
	mo rosali is your <i>moning nei income.</i>	_50.	<u> </u>	
	ou expect an increase or decrease in your expenses within the year after you f	file this	form?	
l. Dov				
	kample, do you expect to finish paying for your car loan within the year or do you expect your mo		payment to increase	or decrease because
For e			payment to increase	e or decrease because
For e	kample, do you expect to finish paying for your car loan within the year or do you expect your mo ication to the terms of your mortgage?		payment to increase	e or decrease because

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Document Page 34 of 59

Fill in this infor	rmation to identify your	case:			
Debtor 1	Robert H Kerzma	n			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
(Spouse II, IIIIIIg)	riist Naille	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
					-
Official For	m 106Dec				
		n Individua	l Debtor's S	chodulos	
Declara	Hon About a	ili iliulviuua	i Depioi 3 3	criedules	12/15
16 (
if two married p	eople are filing togethe	r, both are equally resp	onsible for supplying co	orrect information.	
You must file th	is form whenever you f	ile bankruptcy schedul	es or amended schedule	es. Making a false stat	ement, concealing property, or
			nkruptcy case can resul	t in fines up to \$250,00	00, or imprisonment for up to 20
years, or both.	18 U.S.C. §§ 152, 1341, 1	l519, and 3571.			
0:-	D.I				
Sig	gn Below				
Did you pa	ay or agree to pay some	one who is NOT an att	orney to help you fill out	t bankruptcy forms?	
- No					
■ No					
☐ Yes.	Name of person				kruptcy Petition Preparer's Notice,
				Declaration	n, and Signature (Official Form 119)
Under pena	alty of periury. I declare	that I have read the su	mmary and schedules fi	led with this declaration	on and
	re true and correct.		, ,		
V 1.15	hant II Man		v		
	bert H Kerzman		X Signature	of Debtor 2	
	rt H Kerzman ure of Debtor 1		Signature	UI DEDTOF Z	

Date _____

Date August 19, 2016

Fill in this infor	mation to identify your	case:			
Debtor 1	Robert H Kerzma	 n			
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	widdle Name	Last Maille		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number	1	•			•
(if known)					Check if this is an amended filing
ou must file this	s form whenever you fil	n connection with a bank	or amended schedules.	. Making a false stat	ement, concealing property, or 00, or imprisonment for up to 20
	n Below				
Did you pay	y or agree to pay some	one who is NOT an attor	ney to help you fill out b	ankruptcy forms?	
■ No					
_ Yes. N	Name of person			Attach Ban Declaration	kruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
that they are	etrue and correct.	that Phave read the summ	Mary and schedules filed X Signature of		on and
	re of Debtor 1	•			
Date _A	August 18, 2016		Date		

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Document Page 36 of 59

Fill in	this information to ide	entify your	case:			
Debto		H Kerzma				
Dobto	First Name		Middle Name	Last Name		
Debto (Spouse	e if, filing) First Name		Middle Name	Last Name		
United	d States Bankruptcy Cou	urt for the:	NORTHERN DISTRICT (OF ILLINOIS		
(if know	number n)				-	Check if this is an amended filing
Stat				duals Filing for B		4/10
inform numbe	nation. If more space is er (if known). Answer e	s needed, a every ques at Your Mar	attach a separate sheet to tion.	this form. On the top of an	equally responsible for sup y additional pages, write you	
_	_					
	MarriedNot married					
_						
2. D	uring the last 3 years,	have you l	ived anywhere other than	where you live now?		
] No					
	Yes. List all of the plant	aces you liv	ved in the last 3 years. Do no	ot include where you live nov	I.	
[Debtor 1 Prior Address	:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there
	166 Carriage Way South Elgin, IL 6017	7	From-To:	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
	and territories include A No Yes. Make sure you	rizona, Cali	fornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	ity property state or territor ico, Texas, Washington and V	
F	ill in the total amount of i	income you	received from all jobs and a	ng a business during this you all businesses, including part the together, list it only once ur		ndar years?
] No					
	Yes. Fill in the detail	s.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	January 1 of current y ate you filed for bankru	intev:	■ Wages, commissions, bonuses, tips	\$65,000.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Case 16-26675 Document

Page 37 of 59
Case number (if known) Debtor 1 Robert H Kerzman

			-	shtan 4		Dah4 0		
				ebtor 1		Debtor 2		
				purces of income neck all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)
	r last calen anuary 1 to	dar year: December 31	2015 \	Wages, commissions, onuses, tips	\$165,444.00	☐ Wages, common bonuses, tips	nissions,	
				Operating a business		☐ Operating a b	ousiness	
		dar year befo December 31	2014\	Wages, commissions, onuses, tips	\$289,155.00	☐ Wages, common bonuses, tips	missions,	
				Operating a business		☐ Operating a b	ousiness	
5.	Include include and other winnings. List each s	come regardle public benefit If you are filing	ss of whether the payments; penson a joint case are gross income	nat income is taxable. Ex- sions; rental income; inte nd you have income that	o previous calendar years? amples of other income are a rest; dividends; money collec you received together, list it o stely. Do not include income the	ted from lawsuits; ranks once under Del	oyalties; and btor 1.	
			De	btor 1		Debtor 2		
				urces of income scribe below.	Gross income from each source (before deductions and exclusions)	Sources of inco Describe below.	ome	Gross income (before deductions and exclusions)
	r last calen anuary 1 to	dar year: December 31		sh-out pension nefits	\$85,281.00			
		dar year befo December 31	0044\	sh-out pension nefits	\$18,289.00			
			Ca	pital Gains	\$2,123.00			
Pa 6.	Are either No.	Debtor 1's of Neither Debindividual pring the 9 No. Yes * Subject to	or Debtor 2's dotor 1 nor Debt marily for a per 0 days before y Go to line 7. List below each paid that creditor not include pay adjustment on Debtor 2 or bo	sonal, family, or househo ou filed for bankruptcy, d creditor to whom you pa or. Do not include paymen ments to an attorney for t 4/01/19 and every 3 year oth have primarily const	r debts? umer debts. Consumer debts lid purpose." id you pay any creditor a total id a total of \$6,425* or more i nts for domestic support oblig his bankruptcy case. rs after that for cases filed on	of \$6,425* or more n one or more payr ations, such as chil or after the date of	e? ments and th ld support ar	ne total amount you nd alimony. Also, do
		□ Yes	include paymer	its for domestic support o	id a total of \$600 or more and			
		;	attorney for this	bankruptcy case.				
	Creditor'	s Name and	Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this p	ayment for

Official Form 107

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Document Page 38 of 59

Debtor 1	Robert H Kerzman	Document	Document Page 38 of 59 Case number (if known)	

7.	Insiders include your relatives; any general pa of which you are an officer, director, person in	ey, did you make a payment on a debt you owed anyone who was an insider? Inters; relatives of any general partners; partnerships of which you are a general partner; corporatrol, or owner of 20% or more of their voting securities; and any managing agent, including U.S.C. § 101. Include payments for domestic support obligations, such as child support and				partner; corporations ent, including one for
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	is payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No				ccount of a deb	t that benefited an
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	
Par 9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.	cy, were you a party in ar				
	□ No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	case
	Kerzman v. Kerzman 2015-D-0288	Dissolution of Marriage	16th Judicial C County 100 S. Third St Geneva, IL 601		☐ Pending ☐ On appeal ☐ Concluded	I
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address			oreclosed, garnis Date	hed, attached, s	value of the property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bed No Yes. Fill in the details.		luding a bank or fir	nancial institution	, set off any am	ounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date :	action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a No Yes		erty in the possess	ion of an assigne	e for the benefit	t of creditors, a

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main

Page 39 of 59
Case number (if known) Document Debtor 1 Robert H Kerzman

Pa	rt 5: List Certain Gifts and Contributions				
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	ptcy,	did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person		Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	■ No		did you give any gifts or contributions with a tota	l value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or cor			_	
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal	Describe what you contributed	Dates you contributed	Value
Pa	rt 6: List Certain Losses				
15.	Within 1 year before you filed for bankrupt or gambling? ■ No □ Yes. Fill in the details.	tcy o	r since you filed for bankruptcy, did you lose anyt	hing because of the	it, fire, other disaster,
	how the loss occurred	nclud	ribe any insurance coverage for the loss le the amount that insurance has paid. List pending lance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pa	rt 7: List Certain Payments or Transfers				
16.	consulted about seeking bankruptcy or pr	epar	lid you or anyone else acting on your behalf pay or ing a bankruptcy petition? rs, or credit counseling agencies for services required		rty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	u	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Derrick B. Hager, P.C. 245 W. Roosevelt Rd. Building 15, Suite 119 West Chicago, IL 60185 Debtor's Mother		attorney fees, court filing fee, credit report	August 9, 2016	\$2,368.00
	DECAF 114 Goliad St. Benbrook, TX 76126		pre-bankruptcy credit counseling	August 12, 2016	\$15.00
17.	Within 1 year before you filed for bankrupt promised to help you deal with your credit Do not include any payment or transfer that y	tors o		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Case 16-26675 Doc 1 Page 40 of 59
Case number (if known) Document

Debtor 1 Robert H Kerzman

18.	transfe Include	2 years before you filed for bankruperred in the ordinary course of your leboth outright transfers and transfers ne gifts and transfers that you have alread	busines nade as	s or financial aff security (such as	airs? the granting of a	•			,
	□ Ye	es. Fill in the details.							
	Perso Addre	on Who Received Transfer ess		Description and very property transfer		paym	ribe any property or nents received or debts in exchange		ate transfer was ade
	Perso	on's relationship to you							
19.	benefic N	10 years before you filed for bankru ciary? (These are often called asset-page) o es. Fill in the details.			ny property to a	a self-settle	ed trust or similar device	of w	hich you are a
		of trust		Description and	value of the pro	operty tran	sferred		ate Transfer was
								ma	ade
Par	t 8:	List of Certain Financial Accounts, Ir	nstrume	ents, Safe Deposi	t Boxes, and S	torage Uni	its		
20.	Within	1 year before you filed for bankrupt	cy, wer	e any financial ac	counts or inst	ruments h	eld in your name, or for y	our I	penefit, closed,
20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefits sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, but houses, pension funds, cooperatives, associations, and other financial institutions.				ons, brokerage					
	■ N								
		es. Fill in the details.	Loot	A dimito of	Tyme of coo		Data assaunt was		l oot belenee
		e of Financial Institution and SSS (Number, Street, City, State and ZIP		4 digits of unt number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	t	Last balance before closing or transfer
21.		u now have, or did you have within 1 or other valuables?	year be	efore you filed fo	r bankruptcy, a	any safe de	posit box or other depos	itory	for securities,
	■ N	o							
	□ Y	es. Fill in the details.							
		e of Financial Institution PSS (Number, Street, City, State and ZIP Code)		Who else had aco Address (Number, S State and ZIP Code)		Describe	the contents		Do you still have it?
22.	Have y	ou stored property in a storage unit	or plac	e other than you	r home within	1 year befo	ore you filed for bankrupt	су?	
	■ N	o							
	□ Y	es. Fill in the details.							
		e of Storage Facility PSS (Number, Street, City, State and ZIP Code)	1	Who else has or to it? Address (Number, S State and ZIP Code)		Describe	the contents		Do you still have it?
Par	t 9:	dentify Property You Hold or Contro	l for So	moono Elso					
23.	Do you	u hold or control any property that so meone.			ude any prope	rty you boı	rrowed from, are storing	for, c	or hold in trust
	■ N	o es. Fill in the details.							
	_	er's Name		Where is the pro	nerty?	Describe	the property		Value
		PSS (Number, Street, City, State and ZIP Code)	((Number, Street, City, 9 Code)		Desci int	, and property		value
Par	t 10:	Give Details About Environmental In	formatio	on					

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Case 16-26675 Doc 1 Page 41 of 59
Case number (if known) Document

Debtor 1 Robert H Kerzman

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.				
Rep	ort all notices, releases, and proceedings tha	t you know about, regardless of when	they occurred.		
24.	Has any governmental unit notified you that	you may be liable or potentially liable	under or in violation of an environm	ental law?	
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	
25.	Have you notified any governmental unit of a No	any release of hazardous material?			
	Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	
26.	Have you been a party in any judicial or adm	inistrative proceeding under any envir	ronmental law? Include settlements	and orders.	
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case	
Par	111: Give Details About Your Business or C	Connections to Any Business			
27.	Within 4 years before you filed for bankrupto	cy, did you own a business or have an	y of the following connections to an	y business?	
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity,	either full-time or part-time		
	☐ A member of a limited liability compa	any (LLC) or limited liability partnershi	p (LLP)		
	☐ A partner in a partnership				
	☐ An officer, director, or managing exe	ecutive of a corporation			
	☐ An owner of at least 5% of the voting	or equity securities of a corporation			
	☐ No. None of the above applies. Go to P	art 12.			
	Yes. Check all that apply above and fill	in the details below for each business			
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security		
	Cross Aiden II C	aanaultant	Dates business existed EIN:		
Grace Aidan, LLC 466 Carriage Way South Elgin, IL 60177		consultant		From-To July 2012 through July 2015	

Page 42 of 59 Case number (if known) Document Debtor 1 Robert H Kerzman 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No ☐ Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Robert H Kerzman Signature of Debtor 2 Robert H Kerzman Signature of Debtor 1 Date August 19, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ☐ No Yes

Entered 08/19/16 12:44:10

Case 16-26675

Doc 1

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Filed 08/19/16

Page 43 of 50 number (if known) Debtor 1 Robert H Kerzman 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued Address Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Robert H Kerzman Signature of Debtor 1 Date August 18, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Entered 08/19/16 12:44:10

☐ Yes. Name of Person

Case 16-26675

Doc 1

Filed 08/19/16

Document

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Document Page 44 of 59

Fill in this inforr	mation to identify your	case:				
Debtor 1	Robert H Kerzma	n				
	First Name	Middle Name		Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name		Last Name	_	
United States Ba	inkruptcy Court for the:	NORTHERN DIS	TRICT OF ILL	INOIS	_	
Case number						
(if known)						☐ Check if this is an
						amended filing
~						
Official Fo	rm 108					
Statemer	nt of Intentio	n for Indiv	/iduals	Filing Under Cha	apter 7	12/15
				9		
If you are an indi	ividual filing under cha	pter 7, you must fil	II out this for	m if:		
creditors have	e claims secured by yo	ur property, or				
vou have leas	sed personal property a	and the lease has n	ot expired.			
				bankruptcy petition or by the d	late set for th	ne meeting of creditors,
	-	ne court extends th	e time for ca	use. You must also send copies	to the credi	tors and lessors you list
on the	torm					
		r in a joint case, bo	oth are equall	y responsible for supplying cor	rect informa	tion. Both debtors must
sign an	nd date the form.					
Be as complete a	and accurate as possib	ole. If more space is	s needed, att	ach a separate sheet to this forr	n. On the top	o of any additional pages,
	our name and case nur		•	•	•	, ,
David Line V	O III MII II	. 0				
Part 1: List Yo	our Creditors Who Hav	e Secured Claims				
1. For any credit	ors that you listed in P	art 1 of Schedule D	: Creditors V	Vho Have Claims Secured by Pr	operty (Offic	ial Form 106D), fill in the
information be	elow. editor and the property t	hat is collatoral	What do w	ou intend to do with the proper	tu that	Did you aloim the property
identity the cre	editor and the property t	ilat is collateral	secures a	ou intend to do with the propert debt?	•	Did you claim the property as exempt on Schedule C?
	Vells Fargo Dealer S	ervices		ler the property.		□ No
name:			☐ Retain	the property and redeem it.		=
Description of	2011 GMC Acadia	66 000 miles		he property and enter into a		Yes
	2011 ONO Acadia	00,000 iiiie3		mation Agreement.		
property securing debt:			☐ Retain t	he property and [explain]:		
securing debt.						
Part 2: List Yo	our Unexpired Persona	I Property Leases				
For any unexpire	ed personal property le	ase that you listed		G: Executory Contracts and Un		
				es are leases that are still in effe		period has not yet ended.
Tou may assume	e an unexpireu persona	ai property lease ii	ine irusiee u	oes not assume it. 11 U.S.C. § 3	ιου(μ)(2).	
Describe your u	inexpired personal pro	perty leases			Will t	he lease be assumed?
_						
Lessor's name:					\square N	0
Description of lea Property:	ased					
. 10pony.					□ Y	es
Lessor's name:					□ N	0
Description of lea	ased					U
Property:					□ Y	es
Lessor's name:					Пм	0

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Document Page 45 of 59

Deb	otor 1	Robert H Kerzman	Case number (if known)	·
	scription perty:	n of leased		☐ Yes
Des	sor's na scription perty:	ame: n of leased		□ No □ Yes
Des	sor's na scription perty:	ame: n of leased		□ No □ Yes
Des	sor's na scription perty:	ame: n of leased		□ No □ Yes
Des Pro	perty:	ame: n of leased		□ No □ Yes
Und prop	er pen erty th	nat is subject to an unexpired lease.	dicated my intention about any property of my estate that se	ecures a debt and any personal
X	Rob	obert H Kerzman ert H Kerzman ature of Debtor 1	Signature of Debtor 2	
	Date	August 19, 2016	Date	

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Document Page 46 of 59

Debtor 1 Robert H Kerzman	Case number (if known)
Description of leased Property:	☐ Yes
Lessor's name: Description of leased	. □ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No ·
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention property that is subject to an unexpired lease. X Robert H Kerzman Signature of Debtor 1	X Signature of Debtor 2
Date August 18, 2016	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	_
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Document Page 51 of 59

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Robert H Kerzman		Case No		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	ENSATION OF ATTO	RNEY FOR D	EBTOR(S)	
C	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 ompensation paid to me within one year before the file rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy	y, or agreed to be pai	d to me, for services rende	red or to
	For legal services, I have agreed to accept		\$	2,000.00	
	Prior to the filing of this statement I have received	<u> </u>	\$	2,000.00	
	Balance Due		\$	0.00	
2. \$	335.00 of the filing fee has been paid.				
3. T	he source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. T	he source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. I	I have not agreed to share the above-disclosed com	pensation with any other person	n unless they are me	nbers and associates of my	law firm.
	I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na				firm. A
6. I	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
b. c.	Analysis of the debtor's financial situation, and rend Preparation and filing of any petition, schedules, sta Representation of the debtor at the meeting of credi [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applicati 522(f)(2)(A) for avoidance of liens on he	atement of affairs and plan which tors and confirmation hearing, a reduce to market value; ex ions as needed; preparation	th may be required; and any adjourned he cemption planning	arings thereof;	g of
7. B	y agreement with the debtor(s), the above-disclosed f Representation of the debtors in any d any other adversary proceeding.			ces, relief from stay ac	tions or
		CERTIFICATION			
	certify that the foregoing is a complete statement of a nkruptcy proceeding.	ny agreement or arrangement fo	or payment to me for	representation of the debte	or(s) in
Αu	igust 19, 2016	/s/ Derrick B. Ha	ger		
Da		Derrick B. Hager Signature of Attorn Derrick b. Hager 245 W. Rooseve Building 15, Suit West Chicago, II	r 6286310 ney r, P.C. It Rd. te 119 L 60185 ax: 630-587-7493		-

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main plocument Page 52 of 59 Attorney At Law

	AL PEES AND COSTS.								
The t	total fees and costs of this repr	resentation for legal serv	ices is \$ <u>736</u>	28.00 This	total amo	unt consis	ts of:		
\$	200b. ca	in attorney fees; \$	2000	lv			of legal se		
filing	of a petition in Bankruptcy u	inder Chapter 7 of the Ba	ankruptcy Code	e, including	but not lim	ited to, th	e drafting, p	reparation, a	analyzing
and f	inalization of all required doc	uments, statements, sche	dules and state	ments of fin	ancial affa	irs, plus, i	f applicable,	an addition	al
\$	for I	legal services related to	the drafting, pr	eparation as	nd filing of	a motion	(s) to avoid	a judicial li	en(s) and
relate	ed court appearance;								
\$	335. 4 in co	ourt filing fees;		•					
\$	33,00 for a	a credit report;			."		4		٠
\$	for t	tax transcripts, and;							

The cost for Credit Counseling/Debtor Education fees and/or third-party records search and verification services as applicable (i.e. paid comparative market analysis services, real estate or personal property appraisals, title searches, lien searches, etc.) are either billed separately or are paid directly to the particular service provider.

PRE PETITION PAYMENT UNDERSTANDING.

CLIENT(s) hereby understands that THE FIRM will not perform any of the above described services until the fees are paid in full; thereafter the petition in Bankruptcy under Chapter 7 of the Bankruptcy Code will be filed as soon as practicably possible (Attorney reserves the privilege to hold the petition for actual filing until either he has at least three other similar petitions ready to file or the next calendar Saturday, whichever occurs first in time, in order to maximize efficient use of the Attorney's time and minimize expense to the Client).

THE ABOVE-DISCLOSED FEES AND COSTS DO NOT INCLUDE THE FOLLOWING SERVICE(S): Under Bankruptcy law, representation of the debtors in any dischargeability actions, judicial lien avoidances that come to the attention of the Attorney after the filing of the petition, relief from stay actions or any other adversary proceeding; any non-bankruptcy related services, including but not limited to, assistance and advice regarding mortgage loan modifications, home owner's association disputes of any type or nature, disputes with utility companies regarding security deposits and/or shut-offs, and any other state law related matters.

ADDITIONAL FEES AND COSTS WHICH MAY BE REQUIRED ON A PER INCIDENT BASIS.

CLIENT(s) hereby acknowledges and understands that the above described "TOTAL FEES AND COSTS" are exclusive of the following additional fees and costs which will be assessed on a per incident basis:

- A. THE FIRM prefers that you NOT refer creditors and collection contacts to THE FIRM until after the petition in bankruptcy has been filed and a case number is assigned. Creditors who are otherwise prohibited from continuing their collection efforts after a case is actually filed and a case number is assigned, are NOT PROHIBITED FROM CONTINUING THEIR COLLECTION EFFORTS JUST BECAUSE YOU HAVE RETAINED AN ATTORNEY FOR THAT PURPOSE. If you decide to provide creditors or others trying to collect a debt from you with the contact information of THE FIRM, THE FIRM reserves the right to bill you Twenty-Five Dollars (\$25,00) for each collection call we are made to field and respond to.
- B. THE FIRM strongly encourages CLIENT(s) to provide a complete list of all creditors (including the creditors' names, addresses, telephone numbers, account number and current balance owing) BEFORE the petition in bankruptcy is filed. Purposely leaving a 1525KAUTZ RD., SUITE 400, WEST CHICAGO, IL 60185 * (630)587-7490 FAX (630) 587-7493.

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Mair

known creditor off the list of creditors is considered bankruptcy fraud and may result in the denial of discharge of the debt owed to that creditor, denial of discharge of all of your debt and/or up to five (5) years in prison. Inadvertent omission of a creditor or creditors can be resolved by amendment to an existing petition in bankruptcy but may require additional fees and costs. THE FIRM reserves the right to bill you Fifty-Dollars (\$50.00) to add EACH omitted creditor to your bankruptcy case; plus any actual paper, copying and postage fees incurred.

- 3. PRE-PETITION CREDIT COUNSELING. The CLIENT acknowledges that he/she is required under the Bankruptcy Code to participate in an approved pre-petition credit counseling course and that he/she must obtain a certificate of completion of said course within 180 days of filing for bankruptcy before his/her case will be allowed to proceed. Unless provided for in paragraph one above, the cost related to participation in the credit counseling course is the responsibility of the CLIENT and is a separate cost not included in the fees and costs described in paragraph one.
- 4. PRE-DISCHARGE DEBTOR EDUCATION. The CLIENT acknowledges that he/she is required under the Bankruptcy Code to participate in an approved pre-discharge debtor education course and that he/she must obtain a certificate of completion of said course and provide such to the Court no later than 45 days following the First Meeting of the Creditors. Unless provided for in paragraph one above, the cost related to participation in the debtor education course is the responsibility of the CLIENT and is a separate cost not included in the fees and costs described in paragraph one. The CLIENT further acknowledges that FAILURE TO SIT FOR THE COURSE AND OBTAIN AND PROVIDE TO THE COURT THE CERTIFICATE OF COMPLETION WITHIN 45 DAYS OF THE FIRST MEETING OF THE CREDITORS MAY RESULT IN A DENIAL OF DISCHARGE IN HIS/HER CASE AND MAY RESULT IN A BAR FROM FILING FOR BANKRUPTCY PROTECTION AGAIN FOR AS MANY AS EIGHT YEARS.
- 5. CLIENT shall provide to the ATTORNEY all requested records and documents within 48 hours of such requests and will obtain written verification of authenticity of those records and documents as deemed necessary. CLIENT acknowledges that he/she is responsible for physically coming into possession of requested records and documents and does so at his/her own expense, if any.
- 6. ATTORNEY will actively negotiate with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 U.S.C §522(f)(2)(A) for avoidance of liens on household goods; and prepare and file all required documents and schedules in accordance with the Bankruptcy Code and local rules of the Federal District Court. The above disclosed fee DOES NOT INCLUDE representation of the CLIENT in any dischargeability actions, judicial lien avoidance, relief from stay actions or any other adversary proceeding.
- 7. CLIENT will inform THE FIRM of any changes to the CLIENT's address or telephone or e-mail address with the understanding that failure to do so may constitute failure under this contract.
- 8. CLIENT agrees to inform THE FIRM of any difficulties CLIENT may have in complying with the Retainer Agreement and that this Retainer Agreement may not be altered, changed or amended without mutual agreement and approval by THE FIRM in writing.
- 9. CLIENT has the right to terminate employment of THE FIRM at any time but such termination will not alter any rights or duties under the Retainer Agreement and such termination does not reduce the amount owed to THE FIRM or constitute grounds for any refund of monies paid except by agreement in writing.
- 10. CLIENT understands that any default under paragraphs 1, 2, 5, 7 and 8 OR should the CLIENT fail to fully cooperate with THE FIRM, or fail to provide accurate and complete information to THE FIRM or any Trustee, Judge, creditor or other claimant or any other entity at any time during THE FIRM's representation of CLIENT either before or after the filing of the petition in bankruptcy, such default or failure may result in the withdrawal by THE FIRM but such withdrawal will not alter any of the CLIENT's obligations under this Retainer Agreement and such withdrawal does not reduce the amount owing to THE FIRM except by agreement in writing and does not entitle the CLIENT to any refund of any fees and costs paid for such services.
- 11. CLIENT understands that from time to time an attorney from THE FIRM may be unavailable to appear in court or at other proceedings on CLIENT's behalf and hereby agrees that another attorney may be designated by THE FIRM to substitute for one of THE FIRM's attorney at such court or other proceeding.
- 12. REFUND OF MONIES PAID. All monies paid to the ATTORNEY become the property of THE FIRM and are not subject to refund upon demand. No refunds will be made under any circumstances after 120 days from the date of this Retainer Agreement. If a request for refund is made within 120 days of the date of this Retainer Agreement, all refunds, if any, will be reduced for services rendered and costs advanced to date, including but not limited to a minimum Fifty-Dollars (\$50.00) per calendar-month file maintenance and security fee.
- 13. Any provision of this Retainer Agreement which may be adjudicated to be unlawful or invalid by a court of law or becomes unlawful or invalid by operation of law or legislation, shall thereafter become null and void, but all other provisions of this Retainer Agreement shall continue in full force and effect.
- 14. CLIENT agrees that CLIENT is responsible for all costs of collection, including all court costs and reasonable attorney fees incurred by THE FIRM in the collection of any sums due hereunder.

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main

- 15. The PETITION IN BANKRUPTCY filed on behalf of the above named and below signed CLIENT(S)/DEBTOR(S) is incorporated into this document by reference.
- 16. POST-DISCHARGE LEGAL ADVICE AND ASSISTANCE. Derrick B. Hager, P.C., THE FIRM, is available to CLIENTS for future legal needs and concerns and/or referrals to colleagues with expertise in a particular area of law. By signing this retainer agreement CLIENT acknowledges and accepts that once their bankruptcy case is discharged, <u>future requests for legal advice or assistance will be billed at \$300.00 per hour with a minimum of one-quarter hour per incident / phone call / return phone call; or actual time spent, whichever is greater. In person appointments will be billed for actual time spent with a minimum of one-half hour, whichever is greater.</u>
- 17. The undersigned have voluntarily entered into this Retainer Agreement, consisting of three (3) pages (including the signature page) and by the undersigned's signature(s) below agree to all the obligations, rights and duties herein.

Dated this	, 20
Agreed and Signed:	
D.6 /2-	1/1/1///
Attorney, Derrick B. Hager	Client Signature (debtor)
O	Robert Kerzman
	Client Name Printed (debtor)
	Client Signature (co-debtor)
	Client Name Printed (co-debtor)

United States Bankruptcy Court Northern District of Illinois

In re	Robert H Kerzman		Case No.			
		Debtor(s)	Chapter 7			
	VERIFICATION OF CREDITOR MATRIX					
		Number of Creditors: 24				
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.					
Date:	August 19, 2016	/s/ Robert H Kerzman Robert H Kerzman Signature of Debtor				

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Document Page 56 of 59

United States Bankruptcy Court Northern District of Illinois

		Northern District of Illinois		
In re	Robert H Kerzman		Case No.	
		Debtor(s)	Chapter 7	
	VE	RIFICATION OF CREDITOR M	ATRIX	
		Number of	Creditors:	13
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	ors is true and correct to	the best of my
Date:	August 18, 2016	Robert H Kerzman Signature of Debtor		

Best Buy Credit Card Services PO Box 790441 Saint Louis, MO 63179

Brksb/cbna Po Box 6497 Sioux Falls, SD 57117

Cadence Health 25 North Winfield Rd. Winfield, IL 60190

Capital One Po Box 30285 Po Box 62180 Salt Lake City, UT 84130

CEP-AMERICA-ILLINOIS PC PO Box 582663 Modesto, CA 95358-0046

Charles Schwabb Bank PO Box 982605 El Paso, TX 79998-2605

Chase

Attn: Correspondence Dept Po Box 15298 Wilmingotn, DE 19850

Chase Card Services Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Citibank / Sears Citicorp Credit Services/Attn: Centraliz Po Box 790040 Saint Louis, MO 63179

Citibank/The Home Depot Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 S Louis, MO 63129 Collection Professionals Inc 400 North Dudley St., PO Box 401 Macomb, IL 61455-1546

Comcast PO Box 3002 Southeastern, PA 19398-3002

Discover Financial Po Box 3025 New Albany, OH 43054

Illinois Tollway Authority 2700 Ogden Ave. Downers Grove, IL 60515

Illinos Gastroenterology Group LLC PO Box 7630 Gurnee, IL 60031-7002

Internal Revenue Service (1/1/11) PO Box 7346 Philadelphia, PA 19101-7346

Keynote Consulting 220 West Campus Drive Suite 102 Arlington Heights, IL 60004

Kohls/Capital One Po Box 3120 Milwaukee, WI 53201

Quest Diagnostics 1355 Mittel Boulevard Attn: Patient Billing Wood Dale, IL 60191-1024

Randallwood Radiology SC 1121 Lake Cook Rd., Ste M Deerfield, IL 60015-5234

State Collection Services Inc 2509 S. Stoughton Rd. Madison, WI 53716

Case 16-26675 Doc 1 Filed 08/19/16 Entered 08/19/16 12:44:10 Desc Main Document Page 59 of 59

Tri-Cities Surgery Center LLC 345 Delnor Dr. Geneva, IL 60134

Visa Dept Store National Bank Attn: Bankruptcy Po Box 8053 Mason, OH 45040

Wells Fargo Dealer Services Po Box 3569 Rancho Cucamonga, CA 91729